



1. PERIODS COVERED FROM	TO

This application is to be used for applying for electrical energy direct pay authorization and the basic steelmaking exemption pursuant to Section 144.030.2(12) and Section 144.036, RSMo. The authorization, if issued, is valid for one (1) year only. If applying for the basic steel-making complete parts I, III, and IV. If applying for processing which contains at least 25% recovered materials complete parts I through IV. If your electrical energy costs exceed 10% of total production costs complete parts I, III, IV, V, and VI.

Mail completed application and direct questions to: **MISSOURI DEPARTMENT OF REVENUE, DIVISION OF TAXATION AND COLLECTION, P.O. BOX 3300, JEFFERSON CITY, MO 65105-3300** or call **(573) 751-2836**. (TDD 1-800-735-2966 or fax (573) 522-1160)

2. MO. TAX ID NUMBER		3. EFFECTIVE DATE	EXPIRATION DATE	4. TYPE OF APPLICATION <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL	CODE

[illegible]

OWNER NAME																
STREET OR ROUTE, P.O. BOX NUMBER										COUNTY			CODE 			
CITY										CODE 			STATE 	ZIP CODE 		

<div> <div></div> <div>1</div> </div> BUSINESS ADDRESS		<div> <div></div> <div>2</div> </div> OWNER ADDRESS		<div> <div></div> <div>3</div> </div> OTHER (GIVE FULL ADDRESS BELOW)			
STREET ADDRESS/P.O. BOX NUMBER					COUNTY	CODE	
CITY					CODE	STATE	ZIP CODE

<div> <div></div> <div>1</div> </div> BUSINESS ADDRESS		<div> <div></div> <div>2</div> </div> OWNER ADDRESS		<div> <div></div> <div>3</div> </div> OTHER (GIVE FULL ADDRESS BELOW)			
STREET ADDRESS- DO NOT USE P.O. BOX NUMBER OR RURAL ROUTE					COUNTY	CODE	
CITY					CODE	STATE	ZIP CODE

U.S. STANDARD INDUSTRIAL CLASSIFICATION CODE NUMBER	SIC

PRIMARY: <input type="checkbox"/> COMPOUNDING <input type="checkbox"/> PROCESSING <input type="checkbox"/> MANUFACTURING <input type="checkbox"/> MINING		
SECONDARY: <input type="checkbox"/> FABRICATING <input type="checkbox"/> PROCESSING		
MATERIAL RECOVERY PROCESSING PLANT: <input type="checkbox"/>		
BASIC STEELMAKING: <input type="checkbox"/>	PERCENT EXEMPT FROM SECTION 144.036: _____ %	PROCESSING WHICH CONTAINS 25% RECOVERED MATERIALS: _____

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CODE
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ZIP CODE

## SUPPLIER'S NAME

ZIP CODE

**14. APPLICABLE NUMBERS ASSIGNED BY SUPPLIER (ATTACH SUPPLEMENTAL LIST IF NECESSARY)**

[illegible]

## PART II — RECOVERED MATERIALS

**1. DESCRIPTION OF PROCESSING WHICH CONTAINS AT LEAST 25% RECOVERED MATERIALS:**

## 2. PRODUCT OR PRODUCTS PRODUCED



## SECTION B. TAXABLE EQUIPMENT LISTING

List all taxable equipment, special metered or not, which can include all electricity for air conditioners, lights, refrigerators, heaters, other appliances and machines used in maintenance of living, office, plant, shop and/or warehouse facilities. **Total KWH equals watt hours divided by 1000. Enter in Section C, Line B.**

[illegible]

**SECTION C. COMPUTATION OF USE PERCENTAGE**

ESTIMATED USAGE	KWH	PERCENTAGE
A. EXEMPT		
B. TAXABLE		
C. TOTAL		100.00%

**PART IV — SUPPLIERS' BILLINGS****SECTION A. DETERMINATION OF EXEMPT AND TAXABLE PURCHASES**

Columns 1 and 2 are from suppliers billings.

Column 3 is obtained by multiplying Column 2 by the exempt percentage in Part III, Section C.

Column 4 is obtained by multiplying Column 2 by the taxable percentage in Part III, Section C.

AUDITED PERIOD BY MONTH	1. TOTAL KWH USED	2. TOTAL BILLING EXCLUSIVE OF SALES TAX	3. BILLING PORTION FOR EXEMPT EQUIPMENT	4. BILLING PORTION ON WHICH SALES TAX IS DUE TAXABLE EQUIP.
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
<b>TOTAL</b>		\$	\$	\$

**PART V — COST OF PRODUCTION****SECTION A. TOTAL COST OF PRODUCTION**

Required for exemptions where total cost of electrical energy so used exceeds ten percent (10%) of total production costs.

1. Direct Material .....	1	\$
2. Direct Labor .....	2	
3. Overhead Expenses .....	3	
a. Plant Equipment-Depreciation .....	3a	
b. Plant Equipment-Insurance .....	3b	
c. Plant Equipment-Taxes .....	3c	
d. Plant Building Rent or Depreciation .....	3d	
e. Compensation Insurance or Similar Cost .....	3e	
f. Indirect Labor .....	3f	
g. Utilities .....	3g	
h. List Other Expenses .....	3h	
.....		
.....		
.....		
.....		
4. Total Cost of Production .....	4	\$

**PART VI – SUMMARY**

1. Total cost of electrical energy used in operation (Part IV, Column 2) .....	
2. Total cost of producing product or exempt operation (Part V, Line 4) .....	
3. Total cost of electrical energy used directly in exempt operation (Part IV, Column 3) .....	
4. Total production costs less electrical energy used in production or exempt operation (Line 2 minus Line 3) .....	
5. Ten percent of Line 4 .....	
6. Percentage of electrical energy used in production to total cost of production exclusive of electrical energy so used (Line 3 divided by Line 4) .....	

**Under penalties of perjury, I declare that I have direct control, supervision or responsibility for completing this application.**

SIGNATURE	TITLE	DATE
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COMMENTS:

**FOR OFFICIAL USE ONLY****PART VIII — SIGNATURE**

RECOMMENDATION	CHECKED BY	DATE
<input type="checkbox"/> EXEMPTION APPROVED <input type="checkbox"/> EXEMPTION DISAPPROVED		

SIGNATURE OF AUDITOR/REPRESENTATIVE	DATE	ID NUMBER OF AUDITOR/REPRESENTATIVE
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**FIELD AUDIT**

☐ Recommend Approval      ☐ Recommend Denial  
 Comments:

**BUSINESS TAX**

☐ Recommend Approval      ☐ Recommend Denial  
 Comments:

SIGNATURE	DATE	SIGNATURE	DATE
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